

INFORMATION DISCLOSURE STATEMENT BY APPLICANT Form PTO-1449 (Modified) (Use several sheets if necessary)				COMPLETE IF KNOWN	
				Application Number	10/591,787
				Confirmation Number	3253
				Filing Date	March 3, 2005
				First Named Inventor	Nagaike et al.
				Group Art Unit	1642
				Examiner Name	To be Assigned Chen, Stacy
Sheet	1	of	1	Attorney Docket No. 59150-8037	

U.S. PATENT DOCUMENTS

Examiner Initials*	Cite No.	U.S. Patent or Application		Name of Patentee or Inventor of Cited Document	Date of Publication or Filing Date of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear
		NUMBER	Kind Code (if known)			

FOREIGN PATENT DOCUMENTS

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Examiner Initials*	Cite No.	Foreign Patent or Application			Name of Patentee or Applicant of Cited Document	Date of Publication or Filing Date of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear	T
		Office	NUMBER	Kind Code (if known)				
/SBC/	1.	EP	1 074 624	A1	The Research Foundation for Microbial Diseases of Osaka University	2/7/01		
/SBC/	2.	EP	1 166 797	B1	The Research Foundation for Microbial Diseases of Osaka University	1/2/02		

OTHER PRIOR ART-NON PATENT LITERATURE DOCUMENTS

Examiner Initials*	Cite No.	Include name of the author (in CAPITAL LETTERS), title of the article (when appropriate), title of the item (book, magazine, journal, serial, symposium, catalog, etc.), date, page(s), volume issue number(s), publisher, city and/or country where published.	T
/SBC	3.	Cohen <i>et al.</i> , PNAS USA, <u>90</u> (15):7376-7380 (1993).	

EXAMINER <i>/Stacy B. Chen/</i>	DATE CONSIDERED 09/23/2010
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*EXAMINER: Initial if reference considered, whether or not criteria is in conformance with MPEP 609. Draw line through citation if not in conformance and not relied upon. Type if relied upon but not in conformance.

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